



**COUNTY OF LOS ANGELES  
DEPARTMENT OF AUDITOR-CONTROLLER**

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January 27, 2009

TO: Supervisor Don Knabe, Chairman  
Supervisor Gloria Molina  
Supervisor Mark Ridley-Thomas  
Supervisor Zev Yaroslavsky  
Supervisor Michael D. Antonovich

FROM: Wendy L. Watanabe   
Acting Auditor-Controller

SUBJECT: **CHILDREN'S INSTITUTE, INC CONTRACT COMPLIANCE REVIEW – A  
DEPARTMENT OF CHILDREN AND FAMILY SERVICES AND  
DEPARTMENT OF MENTAL HEALTH SERVICE PROVIDER**

We completed a fiscal and program review of Children's Institute, Inc (CII or Agency) to determine the Agency's compliance with two separate County contracts. The Agency contracts with the Department of Children and Family Services (DCFS) to operate the Wraparound Program and the Department of Mental Health (DMH) to provide mental health services.

**Background**

Under DCFS' Wraparound Program, CII, a private non-profit community-based organization, provides individualized services to children and their families, such as therapy, housing, educational and social assistance. Under the contract with DMH, CII provides mental health services which include interviewing program participants, assessing their mental health needs and developing and implementing a treatment plan. The Agency provides services to clients in Service Planning Areas 4 and 8 and its headquarters is located in the Second District.

DCFS paid CII on a fee-for-service basis at \$4,184 per child, per month or \$611,349 for Fiscal Year (FY) 2007-08. DMH paid CII between \$1.83 and \$4.38 per minute of staff time (\$109.80 to \$262.28 per hour) and \$183.65 per day for day services. CII's contract with DMH was for \$15 million in FY 2007-08.

### **Purpose/Methodology**

The purpose of the mental health program review was to determine whether CII maintained documentation to support the services provided. This included reviewing a sample of the Agency's billings, participant charts and personnel and payroll records. We also interviewed a number of the Agency's staff.

The purpose of the fiscal review was to determine whether CII appropriately accounted for and spent Wraparound and DMH program funds providing the services outlined in their County contract. We evaluated the adequacy of the Agency's accounting records, internal controls and compliance with federal, State and County guidelines.

### **Results of Review**

#### **DMH Program Review**

The Agency maintained the required staffing ratios. In addition, the staff assigned to the County contract possessed the required qualifications. However, the Agency did not comply with several requirements of the contract. For example, CII:

- Billed DMH \$2,260 for unallowable services.
- Did not complete six (17%) of the 35 Progress Notes reviewed in accordance with the County contract.
- Billed DMH for full service days for its Day Treatment Intensive Program but the program duration did not exceed four hours excluding breaks, as required. Specifically, the Day Treatment Program sessions were 3 hours and 20 minutes excluding breaks.

#### **DMH and Wraparound Fiscal Review**

CII's expenditures were allowable, properly documented and accurately billed to DMH and DCFS. In addition, the Agency maintained adequate controls to ensure that revenue was properly recorded and deposited in a timely manner. However, the Agency did not comply with all the fiscal provisions of their contracts. Specifically:

- CII's total DMH program expenditures billed to DMH exceeds the amount recorded on the Agency's accounting records by \$16,372. Agency management explained that the difference was the result of an adjusting entry they made to their accounting records at the recommendation of their external auditors after CII submitted their Cost Report to DMH. However, the Agency did not submit a revised Cost Report to DMH to account for the adjusting entry. Subsequent to our review, CII submitted a revised FY 2006-07 Cost Report to DMH.

- CII allocated direct program salary expenditures to the DMH and Wraparound programs based on estimates rather than actual hours worked.

We have attached the details of our review along with recommendations for corrective action.

### **Review of Report**

We discussed the results of our review with CII, DMH and DCFS on September 3, 2008. In their attached response, CII management concurred with our findings and recommendations, including repaying DMH \$2,260 for unallowable services.

We thank CII management for their cooperation and assistance during this review. Please call me if you have any questions or your staff may contact Don Chadwick at (213) 253-0301.

WLW:MMO:DC:EB

Attachment

c: William T Fujioka, Chief Executive Officer  
Dr. Marvin J. Southard, Director, Department of Mental Health  
Patricia S. Ploehn, Director, Department of Children and Family Services  
Ted Myers, Chief Deputy Director, Department of Children and Family Services  
Susan Kerr, Senior Deputy Director, Department of Children and Family Services  
Mary M. Emmons, President and CEO, Children's Institute, Inc  
Public Information Office  
Audit Committee

**DEPARTMENT OF MENTAL HEALTH AND WRAPAROUND PROGRAMS  
CHILDREN'S INSTITUTE, INC.  
FISCAL YEAR 2007-08**

**BILLED SERVICES**

**Objective**

Determine whether Children's Institute, Inc (CII or Agency) provided the services billed in accordance with their contract with the Department of Mental Health (DMH).

**Verification**

We judgmentally selected 35 billings totaling 6,623 minutes from 573,757 service minutes and 10 full-day billings from 429 services days of approved Medi-Cal billings from October and November 2007. We reviewed the Assessments, Client Care Plans, Progress Notes and Weekly Summaries maintained in the clients' charts for the selected billings. The 6,623 minutes and 10 days represent services provided to 25 program participants. We also traced an additional 103 service days billed to the client attendance sheets to support the services billed.

**Results**

Overall, CII maintained Progress Notes to support the billed service minutes and maintained Weekly Summaries to support the service days billed to DMH. However, 1,235 (19%) of the 6,623 billed service minutes sampled were unallowable. Specifically, the Agency billed for Mental Health Services provided to clients enrolled in the Agency's Day Treatment Intensive (DTI) program, which the contract prohibits since CII also billed DMH \$185 per day to provide DTI services to the client. The DTI services include the delivery of Mental Health Services. The amount overbilled totaled \$2,260.

In addition, the Agency did not always complete Assessments, Client Plans, Progress Notes and Informed Consent in accordance with the County contract requirements.

**Assessments**

CII did not complete Assessments for two (8%) of 25 clients sampled in accordance with the County contract. An Assessment is a diagnostic tool used to document the clinical evaluation of each client and establish the client's mental health treatment needs. Specifically the Assessments did not adequately describe the symptoms and behaviors exhibited by the clients to support the Agency's clinical diagnosis. The County contract requires agencies to follow the Diagnostic and Statistical Manual of Mental Disorders (DSM) when diagnosing clients. The DSM is a handbook published by the American Psychiatric Association for mental health professionals, which lists different categories of mental disorder and the criteria for diagnosing them.

Client Care Plans

CII did not complete the Client Care Plans in accordance with the County contract for two (8%) of 25 clients sampled. Specifically:

- One Client Care Plan did not contain the client's signature or written explanation of the client's refusal or unavailability to sign the plan.
- One Client Care Plan contained goals that were not observable and/or quantifiable.

Progress Notes

The Agency did not complete six (17%) of the 35 Progress Notes reviewed in accordance with the County Contract. Specifically:

- Three Progress Notes did not describe what the clients or service staff attempted and/or accomplished towards the clients' goals.
- Three Progress Notes billed for multiple staff did not describe the contributions of the additional service staff.

Informed Consent

CII did not document Informed Consent in a client's chart for one (20%) of five clients sampled, in which the client received treatment with psychotropic medication. Informed Consent is the client's agreement to a proposed course of treatment based on receiving clear, understandable information about the treatments' potential benefits and risks.

Day Treatment Program Duration

The County contract requires CII to operate a full-day Day Treatment Intensive (DTI) Program. The County contract specifies that the Agency must provide more than four hours of service to bill DMH at the full-day rate. These timeframes do not include time spent for lunch, dinner and breaks. The Agency maintains a program schedule to document compliance with these requirements.

The Agency did not always provide the required number of program hours to clients in their DTI program. Specifically, CII's program schedule indicated that their DTI sessions were three hours and twenty minutes excluding breaks for all ten days reviewed. Although the service duration did not meet the requirements for a full-day billing, the service may qualify for a half-day billing. However, the Agency does not have an agreement with DMH to provide half-day sessions. The Agency should work with DMH to determine the amount over billed.

**Recommendations****CII management:**

1. Repay DMH \$2,260.
2. Ensure that service minutes billed are allowable.
3. Ensure that Assessments, Client Care Plans and Progress Notes are completed in accordance with the County contract.
4. Ensure that Informed Consent is documented in the client's chart prior to treatment with psychotropic medication.
5. Ensure the duration of the Day Treatment Intensive Program meets the required timeframe.
6. Work with DMH management to determine the amount over billed for its Day Treatment Intensive Program and repay DMH.

**STAFFING LEVELS****Objective**

Determine whether the Agency maintained the appropriate staff to client ratio of 1:8 in its DTI program.

**Verification**

We selected 10 days in October and November 2007 and reviewed the staff attendance sheets and client sign-in sheets. We also reviewed staff timecards.

**Results**

The Agency maintained the required staff to client ratio.

**Recommendation**

There are no recommendations for this section.

**STAFFING QUALIFICATIONS****Objective**

Determine whether CII's treatment staff possessed the required qualifications to provide the services.

**Verification**

We reviewed the California Board of Behavioral Sciences' website and/or the personnel files for 20 of the 92 CII treatment staff who provided services to DMH clients during October and November 2007.

**Results**

Each employee in our sample possessed the qualifications required to deliver the services billed.

**Recommendation**

**There are no recommendations for this section.**

**SERVICE LEVELS****Objective**

Determine whether CII's reported service levels varied significantly from the service levels identified in the DMH contract.

We did not perform test work in this area as DMH's contract with CII did not specify the required service levels for each type of service provided for FY 2007-08.

**CASH/REVENUE****Objective**

Determine whether cash receipts and revenue were properly recorded in the Agency's financial records and deposited timely in their bank account. In addition, determine whether the Agency maintained adequate controls over cash and other liquid assets.

**Verification**

We interviewed CII's management and reviewed the Agency's financial records. We also reviewed the Agency's January 2008 bank reconciliations for two bank accounts.

**Results**

CII properly recorded and deposited cash receipts timely. In addition, the Agency prepared bank reconciliations appropriately.

**Recommendation**

**There are no recommendations for this section.**

**COST ALLOCATION PLAN****Objective**

Determine whether CII's Cost Allocation Plan is prepared in compliance with the County contract and the Agency used the plan to appropriately allocate shared program expenditures.

**Verification**

We reviewed the Agency's Cost Allocation Plan and accounting records for FY 2006-07 to ensure that expenditures were properly allocated to the Agency's programs.

**Results**

CII's Cost Allocation Plan was prepared in compliance with the County contract and the Agency used the plan to appropriately allocate shared program expenditures.

**Recommendation**

**There are no recommendations for this section.**

**EXPENDITURES****Objective**

Determine whether program expenditures were allowable under the County contract, properly documented and accurately billed.

**Verification**

We reviewed financial records and documentation for 50 non-payroll expenditure transactions totaling \$91,384 between July 2007 and January 2008.

**Results**

CII's expenditures were allowable, properly documented and accurately billed.

**Recommendation**

**There are no recommendations for this section.**



**FIXED ASSETS AND EQUIPMENT****Objective**

Determine whether fixed assets and equipment costs charged to DMH and the Wraparound Programs were used by the programs and were adequately safeguarded.

**Verification**

We interviewed staff and reviewed the Agency's fixed assets and equipment listing. In addition, we performed a physical inventory of 15 items.

**Results**

The Agency appropriately allocated total Agency fixed asset and equipment costs to DMH and the Wraparound Program. In addition, the Agency adequately safeguarded their fixed assets and equipment.

**Recommendation**

**There are no recommendations for this section.**

**PAYROLL AND PERSONNEL****Objective**

Determine whether payroll expenditures were appropriately charged to the DMH and Wraparound Programs. In addition, determine whether personnel files were maintained as required.

**Verification**

We traced payroll expenditures for 24 employees totaling \$21,992 charged to the DMH and Wraparound Programs for the two-week pay period ending January 12, 2008 and reviewed the payroll records and time reports. We also interviewed 20 employees and reviewed 24 employees' personnel files.

**Results**

CII did not maintain time reports to support direct payroll expenditures for 12 employees in which the employees worked on multiple programs. The Agency charged payroll expenditures to the programs based on estimates not actual hours worked or services provided as required.

**Recommendation**

7. CII management maintain time reports to support payroll expenditures charged to the DMH and Wraparound Programs.

**COST REPORT****Objective**

Determine whether CII's FY 2006-07 Cost Report to DMH was completed in accordance with the County contract.

**Verification**

We traced the Agency's FY 2006-07 DMH Cost Report to the Agency's general ledger.

**Results**

The total DMH program expenditures billed to DMH exceeds the amount identified on the Agency's general ledger by \$6,891. Agency management explained that they received a partial refund from their retirement plan administrator after they submitted their Cost Report to DMH and recorded it in their accounting records but did not submit a revised Cost Report to DMH.

**Recommendation**

8. CII management submit a revised Cost Report to DMH that excludes the \$6,891 amount over billed and repay DMH if they are reimbursed based on their initial Cost Report.



**children's** institute, inc.  
*safe children, strong families, healthy communities*  
celebrating 100 years

October 24, 2008

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Wendy L. Watanabe, Acting Auditor-Controller  
Countywide Contract Monitoring Division  
Los Angeles County Department of the Auditor-Controller  
1000 S. Fremont Avenue, Unit 51  
Alhambra, CA 91803-4737

Re: Response to Children's Institute, Inc., (CII) Contract Compliance Review

Dear Ms. Watanabe:

We are in receipt of the report from the Auditor-Controller pertaining to the review of two separate County contracts between CII and the Department of Mental Health and the Department of Children and Family Services for Fiscal Year 2007-2008.

We are pleased that the Auditor-Controller's review of CII's compliance with County contracts reflects an overall positive outcome, as well as providing CII with useful tools and guidance to continue to improve the high quality of critically needed services we deliver to the children and families in our community. The compliance review specifically indicates:

1. CII maintained required staff to client ratios in its Day Treatment Intensive program
2. CII treatment staff possessed the required qualifications to deliver services billed under the DMH contract.
3. CII expenditures were allowable, properly documented, appropriately allocated, and accurately billed to DMH and DCFS.

We respectfully submit our response to the recommendations made and corrective action plans to be implemented.

**BILLED SERVICES**

**Auditor Controller Results**

Overall, CII maintained Progress Notes to support the billed service minutes and maintained Weekly Summaries to support the service days billed to DMH. However 1,235 (19%) of the 6,623 billed service minutes sampled were unallowable. Specifically, the Agency billed for Mental Health Services provided to clients

enrolled in the Agency's Day Treatment Intensive (DTI) program, which the contract prohibits since CII also billed DMH \$185 per day to provide DTI services to the client. The DTI service includes the delivery of Mental Health Services. The amount over billed totaled \$2,260.

In addition, the Agency did not always complete Assessments, Client Plans, Progress Notes and Informed Consent in accordance with the County contract requirements.

**Recommendation #1**

**Repay DMH \$2,260.**

**Recommendation #2**

**Ensure that minutes billed are allowable.**

**CII Response:**

CII will ensure that all service minutes billed are allowable service minutes by requesting approval for additional services outside of DTI from the DTI Authorization Unit. CII will repay DMH \$2,260 and will communicate with DMH's Reimbursement Unit during the second quarter of the fiscal year to discuss the terms of the payback.

**Auditor Controller Results**

**Assessments**

CII did not complete Assessments for two (8%) of 25 clients sampled in accordance with the County contract. An Assessment is a diagnostic tool used to document the clinical evaluation of each client and establish the client's mental health treatment needs. Specifically, the Assessments did not adequately describe the symptoms and behaviors exhibited by the client to support the Agency's clinical diagnosis. The county contract requires agencies to follow Diagnostic and Statistical Manual of Mental Disorders (DSM) when diagnosing clients. The DSM is a handbook published by the American Psychiatric Association for mental health professionals, which lists different categories of mental disorder and the criteria for diagnosing them.

**Client Care Plan**

CII did not complete the Client Care Plans in accordance with the County contract for two (8%) of 25 clients sampled. Specifically:

\*One Client Care Plan did not contain the clients' signatures or written explanations of the clients' refusals or unavailability to sign the plans.

\*One Client Care Plan contained goals that were not observable and/or quantifiable.

**Progress Notes**

The Agency did not complete six of (17%) of the 35 Progress Notes reviewed in accordance with the County Contract. Specifically:

\*Three Progress Notes did not describe what the client or service staff attempted and/or accomplished towards the clients' goals.

\*Three Progress Notes billed for multiple staff did not describe the contributions of the additional service staff.

**Recommendation #3**

**Ensure that Assessments, Client Care Plans and Progress Notes are completed in accordance with the County contract.**

**CII Response:**

While systematic reviews of charts are conducted at each of our sites by our QI team, ongoing chart documentation training is also provided to staff either individually or in a group setting and Quality Improvement bulletins are distributed and posted on the intranet as a means of continuously educating our staff on chart documentation.

CII will ensure that Assessments are completed in accordance with the County contract and that the symptoms and behaviors exhibited by the client and described in these assessments support the diagnosis from the Diagnostic and Statistical Manual of Mental Disorders (DSM). CII's Quality Improvement Team will conduct training on the completion of Assessments specifically addressing these issues during the second quarter of the fiscal year.

CII will ensure that Client Care Plans are completed in accordance with the County contract by obtaining client signatures or written explanations of the client's refusal or unavailability to sign the Client Care Plans and that the Client Care Plans are completed in accordance with the County contract and that goals are observable and/or quantifiable. CII's Quality Improvement Team will conduct training on the completion of Client Care Plans during the second quarter of the fiscal year.

CII will ensure that Progress Notes are completed in accordance with the County contract and describe staff intervention and/or accomplishment toward the client's goal on Client Care Plan. CII will ensure that Progress Notes are completed in accordance with the County contract and describe the contribution for multiple billed staff. CII's Quality Improvement Team will conduct training on the completion of progress notes during the second quarter of the fiscal year.

**Auditor Controller Results****Informed Consent**

CII did not document Informed Consent in the client's chart for one (20%) of five clients sampled, in which the client received treatment with psychotropic medication. Informed Consent is the client's agreement to a proposed course of treatment based on receiving clear, understandable information about the treatments' potential benefits and risks.

**Recommendation #4**

**Ensure that Informed Consent is documented in the client's chart prior to treatment with psychotropic medication.**

**CII Response:**

CII's psychiatrists were informed of this finding immediately. Charts were reviewed for those clients receiving psychotropic medication to ensure that Informed Consent is documented in the client's chart prior to treatment with psychotropic medication.

**Auditor Controller Results****Day Treatment Program Duration**

The County contract requires CII to operate full-day Day Treatment Intensive (DTI) program. The County contract specifies that the Agency must provide more than four hours of service to bill DMH at the full-day rate. These timeframes do not include time spent for lunch, dinner and breaks. The Agency maintains a program schedule to document compliance with these requirements.

CII billed for full service days but the Agency did not always provide the required number of program hours to clients in their DTI program. Specifically, CII's program schedule indicated that their sessions were three hours and twenty minutes excluding 45 minutes for breaks for all ten days reviewed. Although the service did not meet the requirements for a full-day billing, the service may qualify for a half-day billing. However, the Agency does not have an agreement with DMH to provide half-day sessions. The Agency should work with DMH to determine the amount over billed.

**Recommendation #5 and #6**

**Ensure the duration of DTI program meets the required time frame and work with DMH management to determine the amount over billed for its Day Treatment Intensive program and repay DMH.**

**CII Response:**

**CII Response:**

DTI's program schedule was submitted to DMH in 1999 when CII submitted their negotiation package. The schedule was approved at that time and in subsequent fiscal years. However, CII feels strongly that meal time is a therapeutic intervention, like process group, individual therapy and all other activities in the milieu, and as such is FULLY STAFFED by both counselors and therapists. During the delivery of "meals" we teach social skills, self-regulation skills, and heal the impact of neglect and trauma from early in life that is associated with being nursed and fed. The counselors present teach the social skills, facilitate appropriate group interaction and redirect inappropriate behaviors. The therapists present support an emotionally sensitive and attuned atmosphere, intervene when neglectful and traumatic experiences are reenacted by the children and provide crisis management when children become overwhelmed. Indeed, the federally funded food program which provides lunches for CII children formally requires that mealtime be structured to provide appropriate socialization skills which are demonstrated and encouraged by DTI teachers present with children at these times.

The use of the terminology on the original schedule was for the consumer to understand the day's activities and while the subject area said "meals" the description specified the therapeutic focus of the intervention. Further, DMH's day treatment regulations stipulate that DTI services ... "must be provided face-to-face and provided during continuous hours of operation (excluding short breaks between milieu activities and appropriate breaks for "meals"); these breaks ..." It should be noted that CII's DTI does not "break" between activities and certainly not while providing nourishment to our children (meals). To do so would be unethical on our part as we are providing services to 3 – 5 year old children who have the social emotional capabilities of 1 – 2 year old who require intervention for every activity. We understand that day treatment services in other settings such as residential treatment programs for older children do have "breaks" between activities and for meals, and that is because they are structured very differently.

While CII feels strongly that meal time is a therapeutic intervention, we revised our DTI schedule effective immediately with the following changes (Attachment 1):

- 1) The DTI program has been extended 15 minutes to make space for lunch/mealtime socialization period. CII feels strongly and understands that "feeding and eating" is one of the most therapeutic interventions and as such will continue to offer this service as described above.
- 2) In lieu of breakfast and snack time we will conduct "share and prepare" ("community meeting") as specified in regulations.
- 3) The documentation of daily notes was changed accordingly, i.e., we included the community meetings, and excluded meal time thereby adhering to the time required for a full day DTI program: 4 hours and 5 minutes.

- 4) Effective immediately the program hours are 7:55 a.m. to 12:15 p.m. (Attachment 1).

CII will provide DMH a modified schedule for approval. Although we do not believe that any payback should be required, we will discuss these issues with the District Chief overseeing our contract and communicate with the DMH Reimbursement Unit as needed during the second quarter of the fiscal year.

## **PAYROLL AND PERSONNEL**

### **Auditor-Controller Results**

CII did not maintain time reports to support direct payroll expenditures for 12 employees in which the employees worked on multiple programs. The Agency charged payroll expenditures to the programs based on estimates not actual hours worked as required.

### **Recommendation # 7**

**CII management maintain time reports to support payroll expenditures charged to the DMH and Wraparound Programs.**

### **CII Response:**

CII is currently in the process of implementing the Kronos HR system, which includes an electronic timekeeping system. We expect full implementation by the 4th quarter of FY 08-09. This system will require employees to enter actual time worked on multiple programs for each pay period which will then be reviewed and approved by the respective supervisor. This system will result in reporting of program salary expenditures to the DMH and DCFS programs (as well as all other funding sources) based on actual hours worked.

CII acknowledges that the current practice of determining how employees are charged to multiple programs is based on estimates. Yet we believe this has reflected reasonably accurate time and cost, based on management's consistent monthly review of allocated salary expenses to programs.

## **COST REPORT**

### **Auditor-Controller Results**

The total DMH program expenditures billed to DMH exceeds the amount identified on the Agency's general ledger by \$6,891. Agency management explained that they received a partial refund from their retirement plan administrator after they submitted their Cost Report to DMH and recorded it in their accounting records at but did not submit a revised Cost Report to DMH.



**Recommendation # 8**

**CII management submit a revised Cost Report to DMH that excludes the \$6,891 amount over billed and repay DMH if they are reimbursed based on their initial Cost Report.**

**CII Response:**

CII has submitted the revised FY 06-07 Cost Report to DMH on 9/19/08, and provided a copy to Auditor-Controller. The revision to reduce cost claimed by \$6,891 is reflected as follows:

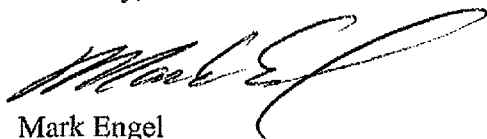
DMH Costs - original Cost Report	\$ 11,300,257
CII adjustment for retirement plan credit to DMH costs	\$ <7,476>
CII adjustment to cost allocated to DMH	\$ 585
Revised DMH Cost Report	<u>\$ 11,293,366</u>

CII acknowledges its oversight in not submitting a timely revised cost report. During FY 06-07, Children's Institute received credit from our Retirement Plan Administrators, refunding forfeited balances of terminated CII employees who were not fully vested in the plan. The portion of this credit that applied to DMH program is reflected above, and was determined subsequent to the DMH cost report deadline.

CII's contract with DMH is on a Cost Reimbursement rate basis, subject to the State and County audit and settlement process, whereby CII is not fully reimbursed based on our initial cost report. For FY 06-07 CII's cost report claim remains unsettled with substantial amounts owed to CII, and therefore, CII would expect repayment to be resolved via the DMH settlement process.

We thank the Auditor-Controller's office for facilitating constructive dialogue concerning these recommendations.

Sincerely,



Mark Engel  
Vice President, Finance

Enclosure: Attachment 1



**Preschool Day Treatment Intensive Program Schedule –  
Attachment 1**

<b>TIME</b>	<b>SUBJECT</b>	<b>DESCRIPTION</b>	<b>STAFF</b>
7:55-8:25	Arrival, greeting, health check, supervised play	Assess mood/problem areas; communicate with parents; discuss goals	counselors, therapists, case manager
8:25-8:35	Clean-up and wash hands	Verbalize/implement transition skills	counselors
8:35-8:50	Share and Prepare Community Meeting	Promote social skills, provide feedback, discuss upcoming activities and associated coping skills	counselors, therapists, case manager
8:50-9:20	Circle Time	Promote social skills and participation	counselors, therapists
9:20-9:25	Hand out stars (token economy)	Identifying goal(s) provide feedback/rewards	counselors
9:25-9:40	Reading Time	Promote listening skills	counselors, therapists
9:40-9:45	Hand out stars (token economy)	Identifying goal(s), provide feedback/rewards	counselors
9:45-10:10	Individual/group therapy*, guided expressive arts group	Small group or individual focus on social/emotional goals, self-expression	therapists, counselors, case manager
10:10-10:15	Clean up and wash hands	Verbalize/implement transition skills	counselors
10:15-10:20	Hand out stars (token economy)	Identifying goal(s), providing feedback/reward	counselors
10:20-10:30	Share and Prepare Community Meeting	Promote social skills, provide feedback, discuss upcoming activities and associated coping skills	counselors, therapists, case manager
10:30-10:35	Review rules for recreational activities	Teach rules and boundaries for interactive play	counselors
10:35-11:05	Recreational Skills	Physical activity, interactive play	counselors, therapists, case manager
11:05-11:20	Relaxation Time	Promote self-regulation and awareness	counselors, therapists
11:20-11:25	Wash Hands	Verbalize/implement transition skills	Counselors



11:25-11:30	Hand out stars (token economy)	Identifying goal(s) provide feedback/rewards	counselors
11:30-11:45	Lunch	Promote social skills, collaboration, table manners, provide corrective emotional experience	counselors, therapists, case manager
11:45-11:50	Hand out stars (token economy)	Identifying goal(s) provide feedback/rewards	counselors, therapists, case manager
11:50-12:15	Supervised activity, rewards, parent communication	Discuss day's events, provide feedback and rewards, exchange information with parents	counselors, therapists, case manager

\*Therapy will be offered to families during early morning and afternoon hours as needed

\*Parent support meetings will be provided on a quarterly basis during program hours

\*Individual therapy will be conducted at least once a week with each child

\*Group Therapy will be provided twice a week with each child

\*Specialized group therapy include sensory-integration, aggression, and sexual reactivity group (as needed)

\*All children will be involved in a therapeutic milieu on a continuous basis

\*Parents will be invited to participate in milieu groups throughout the day

\*Home visits will be made on a quarterly basis (or as needed) as permitted by parents/guardians

\*Therapist/counselors facilitate social skills groups based on Skill-streaming curriculum